



111IIW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant of: David John Heal

Serial No.: 10/009,833

ART UNIT: 1614

Filed: December 17, 2001

EXAMINER: Henley III, R.

Entitled: **THERAPEUTIC AGENTS**

Atty. Docket No.: BBC-180

Commissioner for Patents

P.O. Box 1450,

Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

The undersigned hereby certifies that this correspondence and the correspondence listed below is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR §1.10, postage prepaid, Express Mailing Label No. ET985429092US, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

June 17, 2004

date of mailing and signature

Lisa Rasmussen

Lisa Rasmussen

TRANSMITTAL LETTER*fees processed*

Sir/Madam:

Transmitted herewith are:  Reply Under 37 C.F.R. §1.116; and  An Acknowledgement Postcard to be filed in the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS A fee for additional claims is not required. A fee for additional claims is required. The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER OF EXCESS - CLAIMS	RATE	FEES DUE
<b>TOTAL CLAIMS</b>			0	$\times \$18$	= 0.00
<b>INDEPENDENT</b>			0	$\times \$84$	= 0.00
<b>FIRST INTRODUCTION OF MULT. DEPENDENT CLAIM</b>			<b>+\$280</b>		= 0.00
<b>TOTAL FEES DUE</b>					<b>= 00.00</b>

06/25/2004 CRETANCO 00000002 010025 10009833

01 FC:1251

110.00 DA

PSAN No. 09/399,083

JUN 17 2004

**PAYMENT OF ADDITIONAL FEES**

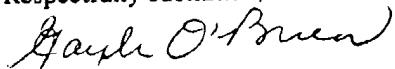
The Commissioner is hereby authorized to charge payment of any additional fees required under 37 CFR 1.16 or 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 010025. A duplicate copy of this transmittal letter is transmitted herewith.

**PETITION FOR EXTENSION OF TIME**

Extension is requested under 37 CFR 1.136(a), and the following extension fee is applicable for the paper(s) filed herewith:  \$110.00 for response within first month pursuant to 37 CFR 1.17(a)(1);  
 \$420.00 for response within second month pursuant to 37 CFR 1.17(a)(2);  
 \$950.00 for response within third month pursuant to 37 CFR 1.17(a)(3);  
 \$1,480.00 for response within fourth month pursuant to 37 CFR 1.17(a)(4);  
 \$2,010.00 for response within fifth month pursuant to 37 CFR 1.17(a)(5);

The Commissioner is hereby authorized to charge payment of any fees required in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 010025 A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



Gayle B. O'Brien  
Agent for Applicants  
Reg. No. 48,812  
Abbott Bioresearch Center, Inc.  
100 Research Drive  
Worcester, MA 01605  
(508) 688-8053